

## AHS Board and Executive Expense Report

**Name** Gregory Cummings  
**Title** Chief Zone Officer, North Zone  
**Location** Westlock

Expenses submitted during the month of March 2017

Travel (1)										
MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Mar-17	P-Card	Meetings			694	187	881			
Mar-17	Expense Claim	Meetings		581			581			
Mar-17	Direct Billing	Meetings	1,134				1,134			
<b>Total</b>			\$ 1,134	\$ 581	\$ 694	\$ 187	\$ 2,596	\$ -	\$ -	\$ -

**Total for the Month**      \$      2,596

Maximum daily single meal expense claimed in the month      \$      24  
 Maximum daily base hotel rate claimed in the month      \$      139  
 Non economy air travel in the month      \$      -

### 1) Travel expenses

Includes local and out of province/country travel expenses. Other travel includes items such as taxis, parking mileage, car rental and other expenses related to travel.

### 2) Professional Development

Includes conference, seminar and course registration fees and material

### 3) Hosting and Hospitality expenses

Hospitality and Hosting expenses may be incurred to advance AHS' mission, vision and values. For example, may include working lunches with staff and prospective employees meetings with government officials, dignitaries, public interest groups, donors other public or private organizations.

### 4) Other

Other expenses include expenses incurred in the normal course of business that are required for work purposes. May include small item technology purchases, books, etc.

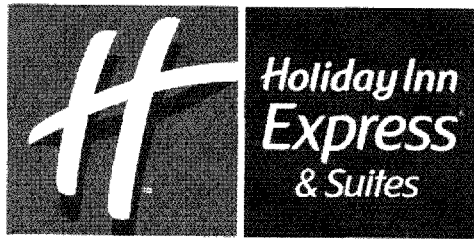
### 5) Remuneration, Allowances Reported in the Financial Statements

Car allowance, honoraria, meeting fees, and any other employment benefits reported in the annual financial statements are excluded from this report.

## AHS Public Disclosure P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CUMMINGS, GREGORY	Chief Zone Officer, North Zone	Westlock	\$ 880.71									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
2/27/2017	Cold Lake PWL Visit and Meetings	AB - North Zone	Accommodations	\$ 131.15				1				
3/1/2017	Grande Prairie SOD Interviews	AB - North Zone	Parking - Lot or Parkade	\$ 50.00				1				
3/1/2017	Grande Prairie SOD Interviews	AB - North Zone	Accommodations	\$ 148.25				1				
3/9/2017	HR Investigation (D.M.)	AB - Other Zones	Accommodations	\$ 170.06				1				
3/14/2017	Wood Buffalo HAC Meeting	AB - North Zone	Taxi	\$ 35.80				1				
3/14/2017	Wood Buffalo HAC Meeting	AB - Other Zones	Accommodations	\$ 113.89				1				
3/15/2017	Wood Buffalo HAC Meeting	AB - North Zone	Taxi	\$ 37.00				1				
3/15/2017	Wood Buffalo HAC Meeting	AB - Other Zones	Parking - Lot or Parkade	\$ 50.00				1				
3/16/2017	Wood Buffalo HAC Meeting	AB - North Zone	Accommodations	\$ 144.56				1				
Approver(s) for the claim		Approval Status	Approval Date									
GORDON, DEBORAH A		Approve	23-Mar-17									

①



02-27-17

<b>Greg Cummins</b> [Redacted]	Folio No. :		Room No. :	[Redacted]
	A/R Number :		Arrival :	02-26-17
	Group Code :		Departure :	02-27-17
	Company :	<b>Alberta Health Services</b>	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
02-26-17	*Accommodation	120.32	
02-26-17	Hotel Levy Tax 4%	4.81	
02-26-17	GST Tax 5%	6.02	
02-27-17	MasterCard		131.15
<b>Total</b>		<b>131.15</b>	<b>131.15</b>
<b>Balance</b>		<b>0.00</b>	

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - [www.ihgwardsclub.com/review](http://www.ihgwardsclub.com/review). We look forward to welcoming you back soon.

GST Tax 5%	Hotel Levy Tax 4%								
6.02	4.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

**Guest Signature:** \_\_\_\_\_

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

*Cold Lake PWK visits and meetings with management.*

Holiday Inn Express & Suites Cold Lake  
 5315 48 Avenue  
 Cold Lake, AB T9M 0K9  
 Telephone: (780) 654-3688 Fax: (780) 654-3699  
 GST#: 85066 1430 RT0001

2

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton  
Tax Code CA5%

Exit Lane 01/03/17 20:02  
Receipt [REDACTED]

Short-Term Parking  
Mastercard  
Daily Lot  
28/02/17 14:54  
01/03/17 20:02  
Period [REDACTED]  
(Tax) \$50.00

Total \$50.00

Payment Received  
MC \$50.00

[REDACTED]  
Auth: [REDACTED]  
Type: Swiped

Sub Total \$47.62  
Tax 5% \$2.38

004569ET - 1/1

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Holiday Inn & Suites

03-01-17

<b>Greg Cummings</b> [Redacted]	Folio No. :		Room No. :	[Redacted]
	A/R Number :		Arrival :	02-28-17
	Group Code :		Departure :	03-01-17
	Company :	Government Canada	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
02-28-17	*Accommodation	134.00	
02-28-17	Sustainability Levy	2.01	
02-28-17	GST Tax - Room	6.80	
02-28-17	Tourism Tax - Room	5.44	
03-01-17	MasterCard		148.25

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - [www.ihg.com/reviews](http://www.ihg.com/reviews). We look forward to welcoming you back soon.

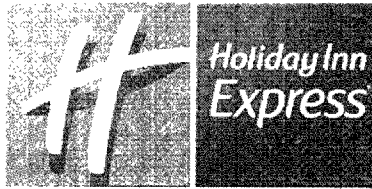
<b>Total</b>	<b>148.25</b>	<b>148.25</b>
<b>Balance</b>	<b>0.00</b>	

Guest Signature: \_\_\_\_\_

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

GI<sup>OP</sup> SOP INTERVIEWS

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03-09-17

<b>Greg Cummings</b> [Redacted]	Folio No. :	Room No. :
	A/R Number :	Arrival : <b>03-08-17</b>
	Group Code :	Departure : <b>03-09-17</b>
	Company : <b>Government Canada</b>	Conf. No. : [Redacted]
	Membership No. : [Redacted]	Rate Code : [Redacted]
	Invoice No. :	Page No. : <b>1 of 1</b>

Date	Description	Charges	Credits
03-08-17	Parking	14.00	
03-08-17	*Accommodation	139.00	
03-08-17	Marketing Fee	4.17	
03-08-17	GST #87857 8491 RT0002	7.16	
03-08-17	AB Tourism Levy	5.73	
03-09-17	MasterCard [Redacted]		170.06
<b>Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.</b>		<b>Total</b>	<b>170.06</b>
		<b>Balance</b>	<b>0.00</b>

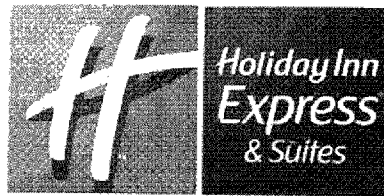
**Guest Signature:** \_\_\_\_\_

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

*DM  
Investigation*

Holiday Inn Express Downtown  
Edmonton10010 - 104 Street  
Canada T5J 0Z1 Edmonton, AB  
Telephone: (780) 423-2450 Fax: (780) 426-6090  
OGST #896724515  
www.hiexdowntown.com

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03-14-17

<b>Greg Cummins</b> [Redacted]	Folio No. :	Room No. :
[Redacted]	A/R Number :	Arrival : <b>03-13-17</b>
[Redacted]	Group Code :	Departure : <b>03-14-17</b>
[Redacted]	Company : <b>Alberta Health Services</b>	Conf. No. : [Redacted]
[Redacted]	Membership No. : [Redacted]	Rate Code : [Redacted]
[Redacted]	Invoice No. :	Page No. : <b>1 of 1</b>

Date	Description	Charges	Credits
03-13-17	*Accommodation	104.49	
03-13-17	G.S.T.	5.22	
03-13-17	Tourism Levy	4.18	
03-14-17	Manual - MasterCard		113.89
<b>Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - <a href="http://www.ihg.com/reviews">www.ihg.com/reviews</a>. We look forward to welcoming you back soon.</b>		<b>Total</b>	<b>113.89</b>
		<b>Balance</b>	<b>0.00</b>

**Guest Signature:** \_\_\_\_\_

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



**Merit**  
Hotel & Suites

**MR Gregory Cummings**

**Canada**

Guest Name:  
Company Name: Alberta Health Services  
Group Name:  
G.S.T: 84970 2444 RT0014

**INFORMATION INVOICE**

Room No. : [REDACTED]  
Arrival : 03-14-17  
Departure : 03-15-17  
Folio No. : [REDACTED]  
Conf. No. : [REDACTED]  
Cashier No. : [REDACTED]  
PO# :  
Job# :  
Cost Center# :

Date	Description	Charges	Credits
03-14-17	Room Charge	139.00	
03-14-17	Tourism Levy 4%	5.56	
03-15-17	MasterCard [REDACTED]		144.56
<b>Total Charges</b>		144.56	
<b>Total Credits</b>			144.56
<b>Balance</b>			<b>0.00</b>

**Guest Signature**

I have received the goods and/or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Thank you for staying with us !



GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton  
Tax Code CAS%

Exit Lane 15/03/17 11:14  
Receipt [REDACTED]

Short-Term Parking

Mastercard  
Daily Lot  
14/03/17 06:40  
15/03/17 11:14  
Period [REDACTED]  
(Tax) \$50.00

Total \$50.00

Payment Received  
[REDACTED] \$50.00

Merchant [REDACTED]  
Auth [REDACTED]  
Type: Swiped

Sub Total \$47.62  
Tax 5% \$2.38

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SUN TAXI  
140 MACKENZIE KING RD  
FORT MCMURRAYAB

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2017/03/15  
TIME 5018 08:23:01  
RECEIPT NUMBER  
[REDACTED]

PURCHASE  
AMOUNT \$32.00  
TIP \$5.00  
TOTAL  
\$37.00

9

SUN TAXI  
140 MACKENZIE KING RD  
FORT MCMURRAYAB

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2017/03/14  
TIME 0186 09:42:34  
RECEIPT NUMBER  
[REDACTED]

PURCHASE  
AMOUNT \$31.80  
TIP \$4.00  
TOTAL

\$35.80

MasterCard

[REDACTED]

APPROVED

AUTH# [REDACTED]  
THANK YOU

VERIFIED BY PIN

MERCHANT COPY

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MasterCard

[REDACTED]

APPROVED

AUTH# [REDACTED]  
THANK YOU

VERIFIED BY PIN

MERCHANT COPY

## AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CUMMINGS, GREGORY	Chief Zone Officer, North Zone	Westlock	\$ 581.50									
Expense Date	Business Reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
12/22/2016	Willow Square Meeting in Fort McMurray	AB - North Zone	Meals Per Diem	\$ 23.50			Bfast \$10.50 Lunch \$13.00	1				
1/5/2017	Site Tour and Staff Meetings - Grande Prairie	AB - North Zone	Meals Per Diem	\$ 47.50			Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1				
1/6/2017	Site Tour and Staff Meetings - Grande Prairie	AB - North Zone	Meals Per Diem	\$ 47.50			Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1				
1/24/2017	Community Meetings in High Level and Fort Vermilion	AB - North Zone	Meals Per Diem	\$ 47.50			Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1				
1/25/2017	Community Meetings in High Level and Fort Vermilion	AB - North Zone	Meals Per Diem	\$ 47.50			Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1				
2/8/2017	Edson Tour and Meeting with Mayor. Hinton Bighorn Integration Meeting	AB - North Zone	Meals Per Diem	\$ 24.00			Dinner \$24.00	1				
2/9/2017	Edson Tour and Meeting with Mayor. Hinton Bighorn Integration Meeting	AB - North Zone	Meals Per Diem	\$ 47.50			Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1				
2/10/2017	Edson Tour and Meeting with Mayor. Hinton Bighorn Integration Meeting	AB - North Zone	Meals Per Diem	\$ 23.50			Bfast \$10.50 Lunch \$13.00	1				
2/28/2017	Travel to Grande Prairie for SOO QEII Interviews	AB - North Zone	Meals Per Diem	\$ 24.00			Dinner \$24.00	1				

### AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
CUMMINGS, GREGORY	Chief Zone Officer, North Zone	Westlock	\$ 581.50

Expense Date	Business Reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
3/1/2017	Travel to Grande Prairie for SOO QEII Interviews	AB - North Zone	Meals Per Diem	\$ 47.50			Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1			
3/8/2017	HR Investigation - Edmonton	AB - North Zone	Meals Per Diem	\$ 24.00			Dinner \$24.00	1			
3/9/2017	HR Investigation - Edmonton	AB - North Zone	Meals Per Diem	\$ 47.50			Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1			
3/13/2017	Wood Buffalo HAC Meeting and meetins with Fort McMurray staff.	AB - North Zone	Meals Per Diem	\$ 24.00			Dinner \$24.00	1			
3/14/2017	Wood Buffalo HAC Meeting and meetins with Fort McMurray staff.	AB - North Zone	Meals Per Diem	\$ 47.50			Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1			
3/15/2017	Wood Buffalo HAC Meeting and meetins with Fort McMurray staff.	AB - North Zone	Meals Per Diem	\$ 10.50			Bfast \$10.50	1			
3/20/2017	Senior LEadership Meeting in Calgary	AB - North Zone	Meals Per Diem	\$ 24.00			Dinner \$24.00	1			
3/21/2017	Senior LEadership Meeting in Calgary	AB - North Zone	Meals Per Diem	\$ 24.00			Dinner \$24.00	1			

Approver(s) for the claim	Approval Status	Approval Date
GORDON, DEBORAH A	Approve	31-Mar-17

## Expense Report Direct Bill Summary

**Purpose of This Form:**

The purpose of this form is to report expenses incurred on behalf of a designated Executive or an AHS Board Member and paid for by a third party vendor. The information will be used for public disclosure reporting.

**Expenses Paid Directly to Third Party Vendors:**

AHS may have established accounts with certain vendors used to book travel and other expenses that are billed directly to AHS.

Examples include but are not limited to hotels, travel agencies, car rental agencies, conferences, courses and expenses reimbursed from a petty cash fund. It is mandatory to include in monthly reports these expenses that pertain to each member. AHS is required to disclose expenses for all applicable receipts and back up must be attached.

### Direct Bill Report

- Enter all items related to expenses incurred while conducting AHS business and paid for via a third party vendor (i.e. accommodations, airline tickets, car rentals, hosting events and working sessions)
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all expenses paid by AHS not mentioned above.
- Copies of invoices and other relevant back up must be attached, approvals for hosting events/working sessions that exceeds \$600 must be provided.
- Information will be used for reporting purposes only.
- A personal cheque must be attached to cover expenses deemed ineligible.
- Indicate whether you have expenses to report in this section for this reporting period: YES

<b>Name :</b> Gregory Cummings	<b>Reporting Period for the Month of :</b> Mar-17
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
2-Mar-2017	Direct Billing	Airline Ticket	March 13th Flight to Fort McMurray for Wood Buffalo HAC Meeting (Air Canada Ticket ██████████)	Marlin Travel	410.56
3-Mar-2017	Direct Billing	Airline Ticket	March 20th Flight to Calgary for the Senior Leadership Meeting (Air Canada Ticket ██████████)	Marlin Travel	323.16
21-Mar-2017	Direct Billing	Airline Ticket	April 3-4 Flight to Grande Prairie for Valleyview Focus Groups (Air Canada Ticket ██████████)	Marlin Travel	400.56
<b>Total Paid in the Month</b>					<b>\$ 1,134.28</b>



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	<b>Trip #:</b> [REDACTED] <b>Booking Date:</b> 02 Mar 17 <b>Client:</b> [REDACTED] <b>Agent:</b> [REDACTED]  <b>File Locator:</b> [REDACTED]
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PASSENGERS: MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	335.60	0.00	\$0.00	74.96	0.00	410.56 CAD
<b>Total:</b>	<b>335.60</b>	<b>0.00</b>	<b>0.00</b>	<b>74.96</b>	<b>0.00</b>	<b>410.56 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	03/02/2017		[REDACTED]	410.56 CAD
Total Payment:					410.56 CAD

Balance Due CAD Currency **0.00 CAD**

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101  
REASON FOR TRAVEL STAFF MEETINGS AND WOOD BUFFALO HAC MEETING

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL  
 \*\*\*\*\* AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 \*\*\*\*\*  
 \*\*\*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*\*\*  
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----  
 ----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 02 Mar 17  
Client: [REDACTED]  
Agent: [REDACTED]

File Locator: [REDACTED]

## MY ITINERARY

<b>Passengers</b> GREGORY CUMMINGS	<b>Citizenship</b> Not Specified	<b>Required Travel Documents</b> Not Specified
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All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: GREGORY CUMMINGS

Booking Date: 03/02/2017

File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08388	EDMONTON INTL 03/13/2017 7:00PM		FT. MCMURRAY 03/13/2017 8:13PM	G		



AIR

Passengers: GREGORY CUMMINGS

Booking Date: 03/02/2017

File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08383	FT. MCMURRAY 03/15/2017 9:55AM		EDMONTON INTL 03/15/2017 11:08AM	G		



**Invoice**

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	<b>Trip #:</b> [REDACTED] <b>Booking Date:</b> 03 Mar 17 <b>Client:</b> [REDACTED] <b>Agent:</b> [REDACTED]  <b>File Locator:</b> [REDACTED]
--	---

**PASSENGERS:** MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	248.20	0.00	\$0.00	74.96	0.00	323.16 CAD
<b>Total:</b>	<b>248.20</b>	<b>0.00</b>	<b>0.00</b>	<b>74.96</b>	<b>0.00</b>	<b>323.16 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	03/03/2017			0.00 CAD
	[REDACTED]	03/03/2017		[REDACTED]	323.16 CAD
Total Payment:					323.16 CAD

**Balance Due CAD Currency 0.00 CAD**

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL  
 \*\*\*\*\* AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 \*\*\*\*\* PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*  
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----  
 -----RED ARROW----- RESERVATION MAY BE CHANGED OR CANCELLED AT LEAST 2 HOURS PRIOR TO DEPARTURE. PLEASE CHECK WWW.REDARROW.CA FOR A LISTING OF PICK UP AND DROP OFF LOCATIONS IN ALBERTA RED ARROW TOLL FREE NUMBER 1 800 232 1958 -----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 03 Mar 17  
Client: [REDACTED]  
Agent: [REDACTED]

File Locator: [REDACTED]

## MY ITINERARY

Passengers	Citizenship	Required Travel Documents
GREGORY CUMMINGS	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: GREGORY CUMMINGS

Booking Date: 03/03/2017

File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08149	EDMONTON INTL 03/20/2017 1:35PM		CALGARY INTL 03/20/2017 2:29PM	G		



AIR

Passengers: GREGORY CUMMINGS

Booking Date: [REDACTED]

File Locator/Ticket #: 2174481780

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08154	CALGARY INTL 03/21/2017 5:00PM		EDMONTON INTL 03/21/2017 5:52PM	G		





**Invoice**

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	<b>Trip #:</b> [REDACTED] <b>Booking Date:</b> 21 Mar 17 <b>Client:</b> [REDACTED] <b>Agent:</b> [REDACTED]  <b>File Locator:</b> [REDACTED]
--	---

**PASSENGERS:** MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	335.60	0.00	\$0.00	64.96	0.00	400.56 CAD
<b>Total:</b>	<b>335.60</b>	<b>0.00</b>	<b>0.00</b>	<b>64.96</b>	<b>0.00</b>	<b>400.56 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	03/20/2017			0.00 CAD
	[REDACTED]	03/20/2017		[REDACTED]	400.56 CAD
Total Payment:					400.56 CAD
<b>Balance Due CAD Currency</b>					<b>0.00 CAD</b>

Total GST                      0.00                      Total HST                      \$0.00

CORPORATE UNIT 101  
REASON FOR TRAVEL SENIOR LEADERS MEETING

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL  
 \*\*\*\*\* AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 \*\*\*\*\*  
 \*\*\*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*  
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----  
 -----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS. -----  
 \*\*\*\*\*PLEASE NOTE CHECKIN TIMES\*\*\*\*\* \*\*DOMESTIC FLIGHTS-  
 -CHECKIN 90 MINUTES PRIOR \*\*DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR

ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

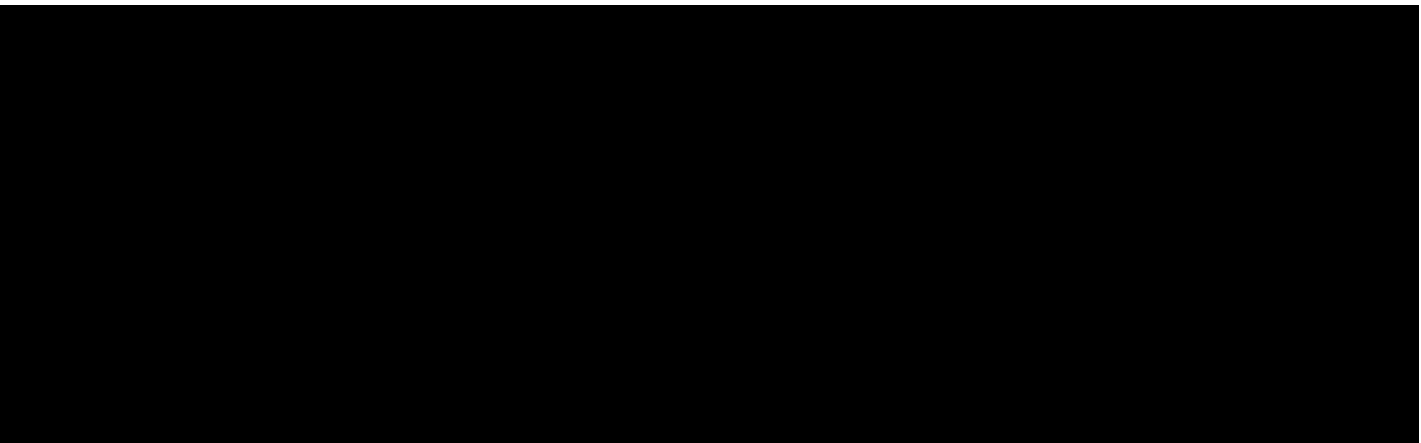
Trip #: [REDACTED]  
Booking Date: 21 Mar 17  
Client: [REDACTED]  
Agent: [REDACTED]

File Locator: [REDACTED]

## MY ITINERARY

Passengers	Citizenship	Required Travel Documents
GREGORY CUMMINGS	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada

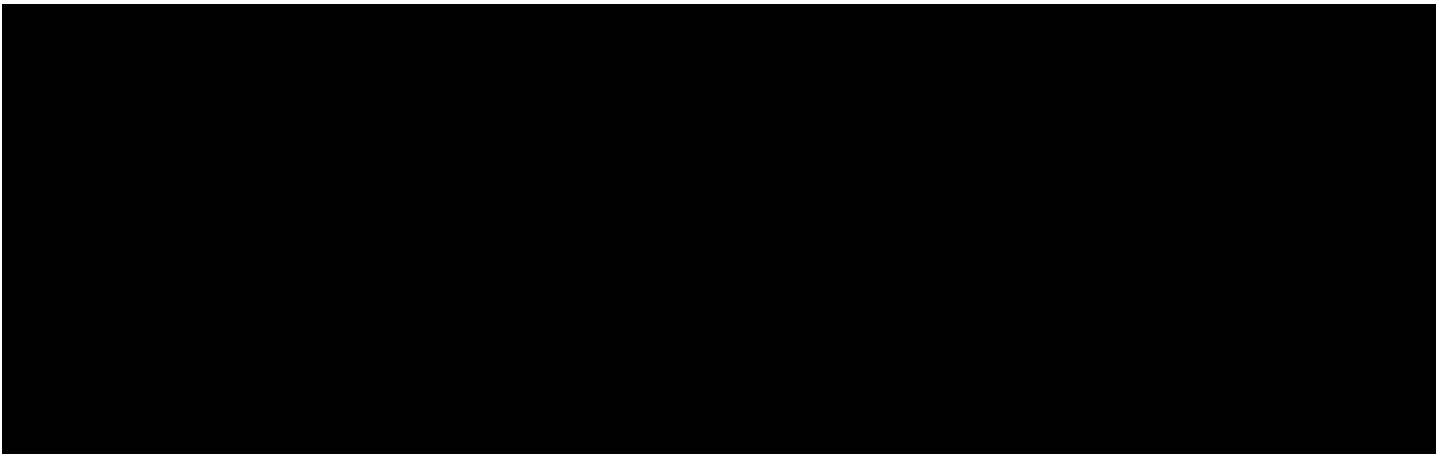


AIR

Passengers: GREGORY CUMMINGS

Booking Date: 02/13/2017  
File Locator/Ticket #: [REDACTED]

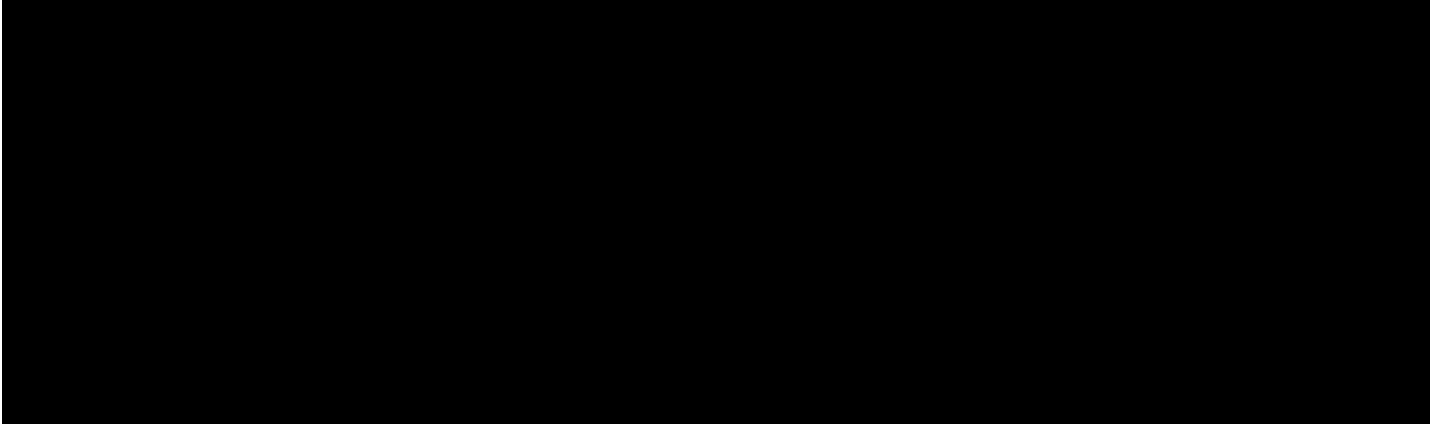
Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08363	EDMONTON INTL 04/03/2017 7:40AM		GRANDE PRAIRIE 04/03/2017 8:52AM	G		



ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 21 Mar 17  
Client: [REDACTED]  
Agent: [REDACTED]

File Locator: [REDACTED]



AIR

Passengers: GREGORY CUMMINGS

Booking Date: 02/13/2017  
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08368	GRANDE PRAIRIE 04/04/2017 7:10PM		EDMONTON INTL 04/04/2017 8:19PM	G		